Miami-Dade County Park & Recreation Department

Program Registration Form



Please Print All Information	Facility Name:		***************************************				Т	Location #		Location #		
Program:	□ Summer	□ Winter	———— Sp	ring		ring D			1			
Participant's Last N			- J		□ Spi	ning 🔲	Other_	T				
Participant's Last Name: First Nam						Social Security:						
Street Address:			City:	City:			Zip:	Phone:				
Ethnic group with	anic 🗖 Black N	y: (Optional) Ion Hispanic 🗀 F	lispanic	☐ Asian (or Pacific	Islander □ Ar	nericar	ı Indian or Alaska	n Native	Other		
Sex: Male F	emale	Age:	Name of School Registrant Attends: (If Applicable)						State			
Last Name		First Name	DL Number					☐ Parent o	r Legal Guardian			
Home Phone		Work Phone	Beeper					☐ Emergency Contact☐ Authorized to Pick up				
Last Name		First Name	DL Number					☐ Parent or Legal Guardian				
Home Phone		Work Phone	Beeper					☐ Emergency Contact☐ Authorized to Pick up				
Last Name		First Name	DL Nu	DL Number					☐ Parent or Legal Guardian			
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			Beeper				☐ Authorized to Pick up					
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Last Name		First Name			DL Nur	mber				☐ Parent or	Legal Guardian	
Home Phone		Work Phone	, La		Beeper					☐ Emergen	cy Contact	
Daniel de la la										☐ Authorize	d to Pick up	
Permission to leave Yes No No	park unsupervis	sed	Writter If yes,	note mus designate	t be on fil time:	le in Park Office						
Special Instructions Medical Allergic Reactions Dietary Behavior Sensitivities Other												
I do hereby release I understand that M items. I have read a	nami-Dade is not	. responsible for m	onevpei	rsonai item	s. etc lo	st during the pro	nrough ogram	this registrant's p and will discoura	participat ge regist	tion in this act trants from bri	tivity. inging such	
Date: Parent or Legal Guardian signature:						Check One: ☐ Mother ☐ Father ☐ Guardian						
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Office use only:	Weeks Pa					Receipts		OFFICE	OLOT			
Summer Camp	1 2 3	4 5 6	7	8 9	10		Т					
Winter Camp	1 2						_					
Spring Camp	1						+					
Other							+					
T-Shirt 🔲 Yes	☐ No Re	gistration Fee paid	Yes	☐ No			+					
Returned Check:							+					
Call 305-7	755-7848 V/TI	DD for materia	l in acc	essible	format	or information	on on	access for Po	ersons	with Disak	oilities.	

Miami-Dade County Park and Recreation Department RULES AND REGULATIONS



It is with pleasure that Miami-Dade County Park and Recreation Department conducts a supervised summer recreation program for the children of this community. In order that your child may have a safe, enjoyable summer, we call to your attention these important safety rules and regulations.

- 1. In order for the child to participate in any of the activities, the child's parent, legal guardian or responsible adult must complete the registration form and pay the registration fee. No refunds. All participants must meet the requirements. Proof of age is required.
- 2. Program hours are 9:00 A.M. to 5:00 P.M. Monday through Friday. Early drop-off at 7:30 A.M. and late pick up at 6:00 P.M. will be available.
- 3. Please pick up your child on time at the end of the daily program, or a late pick-up fee will be charged at \$5.00 per each 15 minutes per child.
- 4. Children must stay with their designated groups at all times. Children who do not stay with their groups will not be allowed to remain in the program.
- 5. Children are assigned to groups according to age-exceptions will not be permitted.
- 6. Children should bring lunch unless otherwise specified. Refrigeration is not provided.
- 7. If your child has permission to leave the park at lunch time or dismissal time, written permission is required to be on file at the park office.
- 8. Please instruct your child to always notify his or her leader before leaving the group. The parent, legal guardian, or other authorized person will be required to sign out the child each time the child leaves the program.
- 9. In order for a child to participate in activities away from the park, a signed permission slip must be on file at the park office, prior to the child leaving the park. If a permission slip is not on file, the child will not go on field trips. Verbal permission will not be honored. Participation for various trips may be based on honor points, attendance, conduct, and on permission slips tuned in on time. Please give your child the exact amount of money required when attending a field trip.
- 10. Please mark all of the child's belongings so they can be easily identified. Counselors are not responsible for any personal items. Please ensure all spending money is secured on your child's person. Staff will not hold any child's money.
- 11. Bicycles and skateboards are prohibited during program hours.
- 12. Athletic shoes must be worn at all times while participating in program activities unless otherwise authorized by the Park Manager. Please ensure your child has proper apparel and the necessary items for the day's activity, i.e., bathing suit, hat, sunscreen, towel, etc.
- 13. Chewing of gum is not allowed in the program.
- 14. If your child shows symptoms of illness prior to the day's activities, please make other arrangements for your child. If your child becomes sick during the day, you must make arrangements to have the child picked up right away.
- 15. Miami-Dade County Park and Recreation Department does not provide medical insurance for participants, nor do we administer any medication, nor do we hold medication. Should injury occur during any scheduled activity, it is the parent or legal guardian's responsibility to provide medical care for the child.
- 16. Group supervision is provided for your child. We are not staffed to provide one-on-one supervision. Rough conduct, disrespect to staff, group disruptions, damage to recreation property or equipment, thievery, fighting, use of profanity, molestation of wildlife or any undesirable act could result in your child's expulsion from the program. Warnings will be issued prior to expulsion. Any disciplinary problems will be discussed between the parent or legal guardian and the Park Manager.